

UNITED STATES DISTRICT COURT  
DISTRICT OF DELAWAREMichael S. Riego  
Plaintiff,  
v.Phelps, Danberg, Taylor, et al  
Defendant(s)APPLICATION TO PROCEED  
WITHOUT PREPAYMENT OF  
FEES AND AFFIDAVIT

CASE NUMBER:

4 3 3

I, Michael S. Riego declare that I am the (check appropriate box)

 Petitioner/Plaintiff/Movant  Other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915, I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated?  Yes  No (If "No" go to Question 2)

If "YES" state the place of your incarceration Delaware Correctional Center-Smyrna, DE

**Inmate Identification Number (Required):** 350529

Are you employed at the institution? Yes Do you receive any payment from the institution? Yes

Attack a ledger sheet form the institution of your incarceration showing, at least the past six months' transactions2. Are you currently employed?  Yes  Noa. If the answer is "YES" state the amount of your take-home salary or wages and pay period and give the name and address of your employer. Delaware Correctional Industries  
\$60/month-1181 Paddock Rd. Smyrna, DE 19977

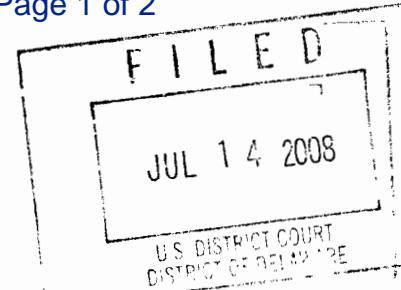
b. If the answer is "NO" state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer.

3. In the past 12 twelve months have you received any money from any of the following sources?

- a. Business, profession or other self-employment
- b. Rent payments, interest or dividends
- c. Pensions, annuities or life insurance payments
- d. Disability or workers compensation payments
- e. Gifts or inheritances
- f. Any other sources

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

If the answer to any of the above is "YES" describe each source of money and state the amount received AND what you expect you will continue to receive. \$200 from my mother for commissary every 6 months.



4. Do you have any cash or checking or saving accounts?  Yes  No  
If "Yes" state the total amount \$\$200

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or other valuable property?  Yes  No  
If "Yes" describe the property and state its value.

6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support, OR state *NONE* if applicable.  
None.

I declare under penalty of perjury that the above information is true and correct.

07/07/08  
DATE

Michael S. Riego  
SIGNATURE OF APPLICANT

**NOTE TO PRISONER:** A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

**DELAWARE CORRECTIONAL CENTER**  
**SUPPORT SERVICES OFFICE**  
**MEMORANDUM**

FILED

JUL 14 2008

U.S. DISTRICT COURT  
DISTRICT OF DELAWARETO: Michael Riego SBI#: 350529FROM: Stacy Shane, Support Services SecretaryRE: 6 Months Account StatementDATE: January 28, 2008

Attached are copies of your inmate account statement for the months of  
July 1, 2007 to December 31, 2007

The following indicates the average daily balances.

<u>MONTH</u>	<u>AVERAGE DAILY BALANCE</u>
<u>July</u>	<u>85.97</u>
<u>Aug</u>	<u>98.08</u>
<u>Sept</u>	<u>69.31</u>
<u>Oct</u>	<u>104.18</u>
<u>Nov</u>	<u>122.18</u>
<u>Dec</u>	<u>73.87</u>

Average daily balances/6 months: 100.59

Attachments

CC: File

Stacy Shane  
1/28/08

Jeanette A. Hart  
1/28/08

# Individual Statement

## From July 2007 to December 2007

Date Printed: 1/28/2008

SBI	Last Name	First Name	MI	Suffix
00350529	RIEGO	MICHAEL		
Current Location: T1				

Comments:	Beginning Month Balance:	\$60.44
	Ending Month Balance:	\$46.22

Trans Type	Date	Deposit or Withdrawal Amount	Medical Hold	Non-Medical Hold	Balance	Trans #	MO# / Ck#	Pay To	Source Name
Misc Wage	7/2/2007	\$51.69	\$0.00	\$0.00	\$112.13	450153			
Canteen	7/10/2007	(\$27.05)	\$0.00	\$0.00	\$85.08	454241			
Canteen	7/17/2007	(\$47.67)	\$0.00	\$0.00	\$37.41	457394			
Pay-To	7/19/2007	(\$4.00)	\$0.00	\$0.00	\$33.41	458927			MASJID MUHAMMAD
Canteen	7/24/2007	(\$29.65)	\$0.00	\$0.00	\$3.76	461265			
Mail	7/26/2007	\$200.00	\$0.00	\$0.00	\$203.76	462513			
Pay-To	7/26/2007	(\$60.00)	\$0.00	\$0.00	\$143.76	462586			
Misc Wage	8/1/2007	\$58.80	\$0.00	\$0.00	\$202.56	463367			
Canteen	8/1/2007	(\$56.23)	\$0.00	\$0.00	\$146.33	464509			
Canteen	8/7/2007	(\$25.80)	\$0.00	\$0.00	\$120.53	467651			
Canteen	8/14/2007	(\$14.33)	\$0.00	\$0.00	\$106.20	471211			
Canteen	8/21/2007	(\$18.73)	\$0.00	\$0.00	\$87.47	474382			
Supplies-Mail/Posta	8/21/2007	\$0.00	\$0.00	(\$9.49)	\$87.47	475126			
Pay-To	8/22/2007	(\$25.00)	\$0.00	\$0.00	\$62.47	475712			
Supplies-Mail/Posta	8/24/2007	(\$9.49)	\$0.00	\$0.00	\$52.98	477457			
Canteen	8/28/2007	(\$15.22)	\$0.00	\$0.00	\$37.76	478135			
Misc Wage	9/4/2007	\$67.25	\$0.00	\$0.00	\$105.01	479991			
Pay-To	9/4/2007	(\$4.00)	\$0.00	\$0.00	\$101.01	480745			
Canteen	9/4/2007	(\$28.69)	\$0.00	\$0.00	\$72.32	481551			
Canteen	9/11/2007	(\$21.65)	\$0.00	\$0.00	\$50.67	484962			
Canteen	9/18/2007	(\$42.59)	\$0.00	\$0.00	\$8.08	487281			
Mail	9/26/2007	\$200.00	\$0.00	\$0.00	\$208.08	490958			
Misc Wage	10/1/2007	\$66.33	\$0.00	\$0.00	\$274.41	492960			
Canteen	10/2/2007	(\$68.39)	\$0.00	\$0.00	\$206.02	494605			
Canteen	10/9/2007	(\$24.36)	\$0.00	\$0.00	\$181.66	497377			
Supplies-Mail/Posta	10/12/2007	\$0.00	\$0.00	(\$4.60)	\$181.66	499481			
Canteen	10/16/2007	(\$24.48)	\$0.00	\$0.00	\$157.18	500381			
Pay-To	10/19/2007	(\$5.20)	\$0.00	\$0.00	\$151.98	502914			MASJID MUHAMMAD
Supplies-Mail/Posta	10/19/2007	(\$4.60)	\$0.00	\$0.00	\$147.38	503157			10/3/07
Supplies-Mail/Posta	10/22/2007	\$0.00	\$0.00	(\$4.60)	\$147.38	503645			10/11/07
Canteen	10/23/2007			\$0.00	\$130.26	504130			

**Individual Statement**  
**From July 2007 to December 2007**

Date Printed: 1/28/2008

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SSN	Last Name	First Name	MI	Suffix	Comments:	Beginning Month Balance:	Ending Month Balance:
00350529	RIEGO	MICHAEL				\$60.44	\$46.22
Current Location: T1							

Trans Type	Date	Deposit or Withdrawal Amount	Medical Hold	Non-Medical Hold	Balance	Trans #	MO# / Ck#	Pay To	Source Name
Supplies-Mail/Posta	10/25/2007	(\$4.60)	\$0.00	\$0.00	\$125.66	505785		10/11/07	
Canteen	10/30/2007	(\$49.86)	\$0.00	\$0.00	\$75.80	506727			
Misc Wage	11/1/2007	\$66.04	\$0.00	\$0.00	\$141.84	508426			PI 9/24-10/23/07
Pay-To	11/7/2007	(\$6.00)	\$0.00	\$0.00	\$135.84	511261			DIVISION OF VITAL
Medical	11/9/2007	\$0.00	(\$4.00)	\$0.00	\$135.84	512444			11/7/07
Medical	11/9/2007	(\$4.00)	\$0.00	\$0.00	\$131.84	512559			11/7/07
Canteen	11/13/2007	(\$26.86)	\$0.00	\$0.00	\$104.98	513322			
Canteen	11/27/2007	(\$49.56)	\$0.00	\$0.00	\$55.42	518425			
Pay-To	11/27/2007	\$6.00	\$0.00	\$0.00	\$61.42	518809			VOID CK#22641
Misc Wage	12/3/2007	\$50.12	\$0.00	\$0.00	\$111.54	522031			PI 10/24-11/23/07
Pay-To	12/3/2007	(\$12.00)	\$0.00	\$0.00	\$99.54	522310			DIV OF VITAL RECO
Canteen	12/11/2007	(\$26.64)	\$0.00	\$0.00	\$72.90	525933			
Canteen	12/26/2007	(\$26.68)	\$0.00	\$0.00	\$46.22	532033			
							Ending Month Balance:	\$46.22	

Total Amount Currently on Medical Hold: \$0.00

Total Amount Currently on Legal Hold: \$0.00

Total Amount Currently on Restitution Hold: \$0.00

Total Amount Currently on Other Hold: \$0.00